



PART B - FEE(S) TRANSMITTAL

APR 14 2004

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Karin Smith	Walter Fasse	(Depositor's name)
Karin Smith	Walter Fasse	(Signature)
April 14, 2004	4/14/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/016,495	10/30/2001	Klaus Sauter	4172	4556

TITLE OF INVENTION: MICROELECTRONIC PACKAGE WITH AN ATTACHMENT LAYER INCLUDING SPACER ELEMENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	04/20/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRAN, THIEN F	2811	257-780000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. W.F.Fasse2. W.G.Fasse

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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Conti Temic microelectronic GmbH**D-90411 Nuernberg, Fed. Rep. of Germany**Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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- ☒ Publication Fee
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☐ A check in the amount of the fee(s) is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0507 (enclose an extra copy of this form).

any deficiency in

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

W.F.Fasse (Date) 04/14/04

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04/15/2004 AWONDAF2 00000040 10016495

01 FC:1501

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02 FC:1504

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TRANSMIT THIS FORM WITH FEE(S)

**FASSE PATENT ATTORNEYS, P.A.**58-G MAIN ROAD NORTH, P.O. BOX 728
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WALTER F. FASSE

WOLFGANG G. FASSE
Of Counsel**TELEFAX COVER SHEET**

DATE: April 14, 2004

TO: MS ISSUE FEE
COMMISSIONER FOR PATENTS

FAX NO.: 703-746-4000

FROM: WALTER F. FASSE, ESQ.
FASSE PATENT ATTORNEYS, P.A.RE: Applicant: Klaus SAUTER et al. Our Case No: 4172
USSN: 10/016,495
Filed: Oct. 30, 2001
Title: MICROELECTRONIC PACKAGE WITH AN ATTACHMENT LAYER
INCLUDING SPACER ELEMENTSTOTAL NUMBER OF SHEETS BY TELEFAX: 3 (INCLUDING COVER SHEET)

NOTE: We are enclosing:

- a) Issue Fee / Publication Fee Transmittal (Form PTOL-85);
- b) Credit Card Payment (Form PTO-2038) (\$1630.00);
- c) ~~Transmittal of Supplemental Declaration;~~
- d) ~~Supplemental Declaration.~~

W.F. Fasse

CERTIFICATE OF FAX TRANSMISSION: Reg. No.: 36132

I hereby certify that this correspondence with all indicated enclosures is being transmitted by telefax to 703-746-4000 on the date indicated below, and is addressed to:
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Karin Smith - April 14, 2004

Karin Smith - April 14, 2004

Walter F. Fasse 4/14/04
Walter F. Fasse

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